## **COMBINED DECLARATION AND POWER OF ATTORNEY**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

## PHARMACEUTICALLY USEFUL SALTS OF CARBOXYLIC ACID DERIVATES

the spec	ification of which:		
OR	is attached hereto.		
	was filed on	with Express Mail No.	(Application Number not yet known)
OR	was filed on 16 June 20 PCT International Application	as United States App on Number <u>PCT/SE2004/00964</u> (if applicable).	olication Number or and was amended on
includin	I hereby state that I have revi ag the claims, as amended by a	ewed and understand the contents of any amendment referred to above.	the above-identified specification,
§1.56.	I acknowledge the duty to dis	sclose information which is material	to patentability as defined in 37 CFR
applicat	I hereby claim the benefit un ion(s) listed below:	der Title 35, United States Code, §11	9(e)(1) of any United States provisional
	U.S. Serial No.	Filing Date	Status
matter of Internat acknow of Feder	of any PCT International apply of each of the claims of this ap- ional application in the manne ledge the duty to disclose all in	lication designating the United States plication is not disclosed in the prior r provided by the first paragraph of T nformation I know to be material to p h became available between the filing	20 of any United States application(s), or s, listed below and, insofar as the subject United States application or PCT Fitle 35, United States Code, §112, I patentability as defined in Title 37, Code g date of the prior application and the
	U.S. Serial No.	Filing Date	Status

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application designating at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

Country	Application No.	Filing Date	Priority Claimed
GB	0314129.8	18 June 2003	⊠Yes
			Yes No

I hereby appoint all registered practitioners associated with Customer Number 28120 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to:

## **Customer Number 28120**

Direct all telephone calls to PATRICIA GRANAHAN, Reg. No. 32,227, at telephone number (617) 951-7449.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor:

Carl-Johan, AURELL

Residence Address: Södertälje, Sweden

Citizenship: SE

Inventor's Signature:

Post Office Address: AstraZeneca R&D Södertälje, SE-151 85 Södertälje, Sweden

Full Name of Inventor:	Mikael DAHLSTRÖM
Inventor's Signature:	Mikael Dahlste Date: 2005-12-05
Residence Address:	Mölndal, Sweden
Citizenship:	FI .
Post Office Address:	AstraZeneca R&D Mölndal, SE-431 83 Mölndal, Sweden
Full Name of Inventor:	Eva-Lotte LINDSTEDT-ALSTERMARK
Inventor's Signature:	Eva-toHelindokalf Aldermark Date: 2005-12-06
Residence Address:	Mölndal, Sweden
Citizenship:	SE .
Post Office Address:	AstraZeneca R&D Mölndal, SE-431 83 Mölndal, Sweden
Full Name of Inventor:	Anna MINIDIS
Inventor's Signature:	(Amy Mund) Date: 2005-11-29
Residence Address:	Södertälje, Sweden
Citizenship:	SE .
Post Office Address:	AstraZeneca R&D Södertälje, SE-151 85 Södertälje, Sweden
Full Name of Inventor:	Bengt OHLSSON
Inventor's Signature:	Bast OM Date: 2005-12-06
Residence Address:	Mölndal, Sweden
Citizenshin:	SE

AstraZeneca R&D Mölndal, SE-431 83 Mölndal, Sweden

Post Office Address:

Full Name of Inventor: Erica STAHLE

Inventor's Signature: Date: 2005-11-17

Citizenship: SE

Residence Address:

Post Office Address: AstraZeneca R&D Södertälje, SE-151 85 Södertälje, Sweden

Södertälje, Sweden